## **Division of Corporations Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000205130 3)))



H210002051303ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INT.

Account Number : 120000000019

Phone

: (305)552-5973

Fax Number

: (305)675-5944

**Enter the	email	address	for	this	busines	s entity	to be	used	for	future
annual	report	t mailin	gs. E	nter	only or	ne emaiĺ	addres	s ple	ase,	**

Emai	l Add	lress:
	_ ~~~	

## FLORIDA PROFIT/NON PROFIT CORPORATION JM & GENERAL SALES, INC

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
Estimated Charge	\$78.75		

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	Principal street address		
NW 72 AVE	Principal street address	339	Mailing address, if different is: 99 NW 72 AVE
		129	<del></del>
MI, FL 33122			AMI, FL 33122
TICLE III PU	RPOSE		<u> </u>
purpose for whi	ch the corporation is organized is:		
AND ALL LAW	FUL BUSINESS		
·		<del></del> -	
<del> </del>			
·			<del></del>
		<del></del> .	
			·
ICLE IV SHA	ARES 100		
ICLE IV SHA	ARES 100 of stock is:		
tumber of shares	of stock is:		
tumber of shares	of stock is:  FIAL OFFICERS AND/OR DIRECTORS		
tumber of shares	of stock is:  FIAL OFFICERS AND/OR DIRECTORS  P. NELSON A. TOPPES ALONSO	Name and	D: JUAN M. ALONSO CHACIN
tumber of shares  ICLE V INIT  Name and T	Of stock is:  TIAL OFFICERS AND/OR DIRECTORS  P: NELSON A. TORRES ALONSO  itle:  3399 NW 72 AVE	Name and	D: JUAN M. ALONSO CHACIN Title: 3399 NW 72 AVE
tumber of shares	of stock is:  TIAL OFFICERS AND/OR DIRECTORS  P: NELSON A. TORRES ALONSO  itle:		3399 NW 72 AVE
tumber of shares  ICLE V INIT  Name and T	P: NELSON A. TORRES ALONSO 3399 NW 72 AVE		3399 NW 72 AVE 129
tumber of shares  ICLE V INIT  Name and T	P: NELSON A. TORRES ALONSO itle: 3399 NW 72 AVE		3399 NW 72 AVE
tumber of shares  ICLE V INIT  Name and T  Address	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:	3399 NW 72 AVE  129  MIAMI, FL 3:1122
tumber of shares  ICLE V INIT  Name and T	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:	3399 NW 72 AVE 129
tumber of shares  ICLE V INIT  Name and T  Address	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:  Name and	3399 NW 72 AVE  129  MIAMI, FL 3:1122
Name and Ti	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:  Name and	3399 NW 72 AVE  129  MIAMI, FL 3:1122  Title:
Name and Ti	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:  Name and	Title:  3399 NW 72 AVE  129  MIAMI, FL 3:1122  Title:
Name and Ti	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:  Name and Address:	3399 NW 72 AVE  129  MIAMI, FL 3:1122  Title:
Name and Ti	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:  Name and Address:	3399 NW 72 AVE  129  MIAMI, FL 3:1122  Title:
Name and Ti	P: NELSON A. TORRES ALONSO  3399 NW 72 AVE  129  MIAMI, FL 33122	Address:  Name and Address:	3399 NW 72 AVE  129  MIAMI, FL 3:1122  Title:
Name and Ti	FIAL OFFICERS AND/OR DIRECTORS P: NELSON A. TORRES ALONSO  itile:  3399 NW 72 AVE  129  MIAMI, FL 33122	Address: Name and Address: Name and N	3399 NW 72 AVE  129  MIAMI, FL 3:1122  Title:

Name	and Title:	Name and Title:
Addr	ess	
ARTICLE VI	REGISTERED AGENT	
Name:	Florida street address (P.O. Box NOT acceptable)  JUAN M. ALONSO CHACIN	of the registered agent is:
Address:	3399 NW 72 AVE. STE 129	_
	MIAMI, FL 33122	
<u>ARTIÇLE VII</u>	INCORPORATOR	
The name and	address of the Incorporator is:	
Name:	JUAN M. ALONSO CHACIN	
Address:	3399 NW 72 AVE. STE 129	
	MIAMI, FL 33122	_
Effective date, i (If an effective filing.)	oate is listed, the date must be specific and cann	ot be more than five days prior or 90 days after the
Note: If the dat the document's	e inserted in this block does not meet the applicable effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as
Having been na this certificate, I	med as registered agent to accept service of proces am familiar with and accept the appointment as re	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
×	von Alien	05/04/2021
Ű	Required Signature/Registered Agent	Date
submit this document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felor	true. I am aware that the false information submitted in a ty as provided for in s.817.155, F.S.
X	un flour	05/04/2021
1.4Htt	ired Signature incorporator	Date